



**STATE OF TENNESSEE  
DEPARTMENT OF COMMERCE AND INSURANCE  
FUNERAL BOARD AND BURIAL SERVICES**

500 JAMES ROBERTSON PARKWAY, SECOND FLOOR

NASHVILLE, TENNESSEE 37243-1144

PHONE (615) 741-5062

FAX (615) 532-1903

[www.state.tn.us/commerce/boards/funeral](http://www.state.tn.us/commerce/boards/funeral)

**PRENEED SELLER (ESTABLISHMENT) REGISTRATION FORM**

This application for the establishment to sell preneed funeral merchandise and services is pursuant to TCA § 62-5-405 and Rule 0780-5-10-.14. Make fee payable to Burial Services in the amount of \$750.00 and mail to the above address.

Name of Funeral Home:

\_\_\_\_\_

Site Location:

\_\_\_\_\_

Mailing Address:

\_\_\_\_\_

Phone: (    ) \_\_\_\_\_ Manager: \_\_\_\_\_

Establishment's Owner/Parent Company:

\_\_\_\_\_

Mailing Address:

\_\_\_\_\_

Phone: (    ) \_\_\_\_\_ Contact Person: \_\_\_\_\_

Name of Trustee:

\_\_\_\_\_

Mailing Address:

\_\_\_\_\_

Phone: (    ) \_\_\_\_\_ Contact Person: \_\_\_\_\_

\_\_\_\_\_  
Signature of Manager/Owner

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary Public

(SEAL)

My Commission Expires: \_\_\_\_\_